 *Enhancing Judicial Excellence*

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** WORKSHOP ATTENDANCE CONFIRMATION FORM**

**Course Name:**   **Date of course:**

|  |
| --- |
| **Personal Details** |
| Surname |  |
| First name: |  |
| ID Number: |  |
| Office tel number |  |
| Mobile number (required for flight arrangements) |  |
| Office address |  |
|  |
| Please tick: | Acting Permanent |
|  |  |
| **Air Travel** |  |
| Airport of departure: |  |
| Date of departure: |  |
| Time of Departure: |  |
| Date of Return: |  |
| Time of Return: |  |
| Frequent Flyer Number: |  |
|  |  |
| **Accommodation Required:** | Yes No |
| Smoking | Yes No |
| Date of arrival: |  |
| Date of departure: |  |
| **Please specify dietary Requirements:** |  |
| **Disability: if yes, please specify** |  |

***SAJEI will not provide accommodation for delegates staying within a 50km radius of the venue.***

**Undertaking**

I will provide SAJEI with changes to the requested travel/accommodation arrangements fourteen (14) days before the scheduled event that I am attending. Failure to do so, I give consent to the Office of the Chief Justice to recover from me the penalty and/or costs levied by the service provider for no–show, whichever is applicable.

**Name: Approval of Cluster / Sub Cluster Head**

**Persal Number: ­­­­­­­­­­­­­­­ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: Approval of Head of Office:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**